



AN INVITATION TO REVITALIZE GREATER VANCOUVER'S LIVABLE REGION STRATEGY

The
Social Quality of Community Life

Greater Vancouver Regional District
March 1990

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THE SOCIAL QUALITY OF COMMUNITY LIFE

PREPARED FOR

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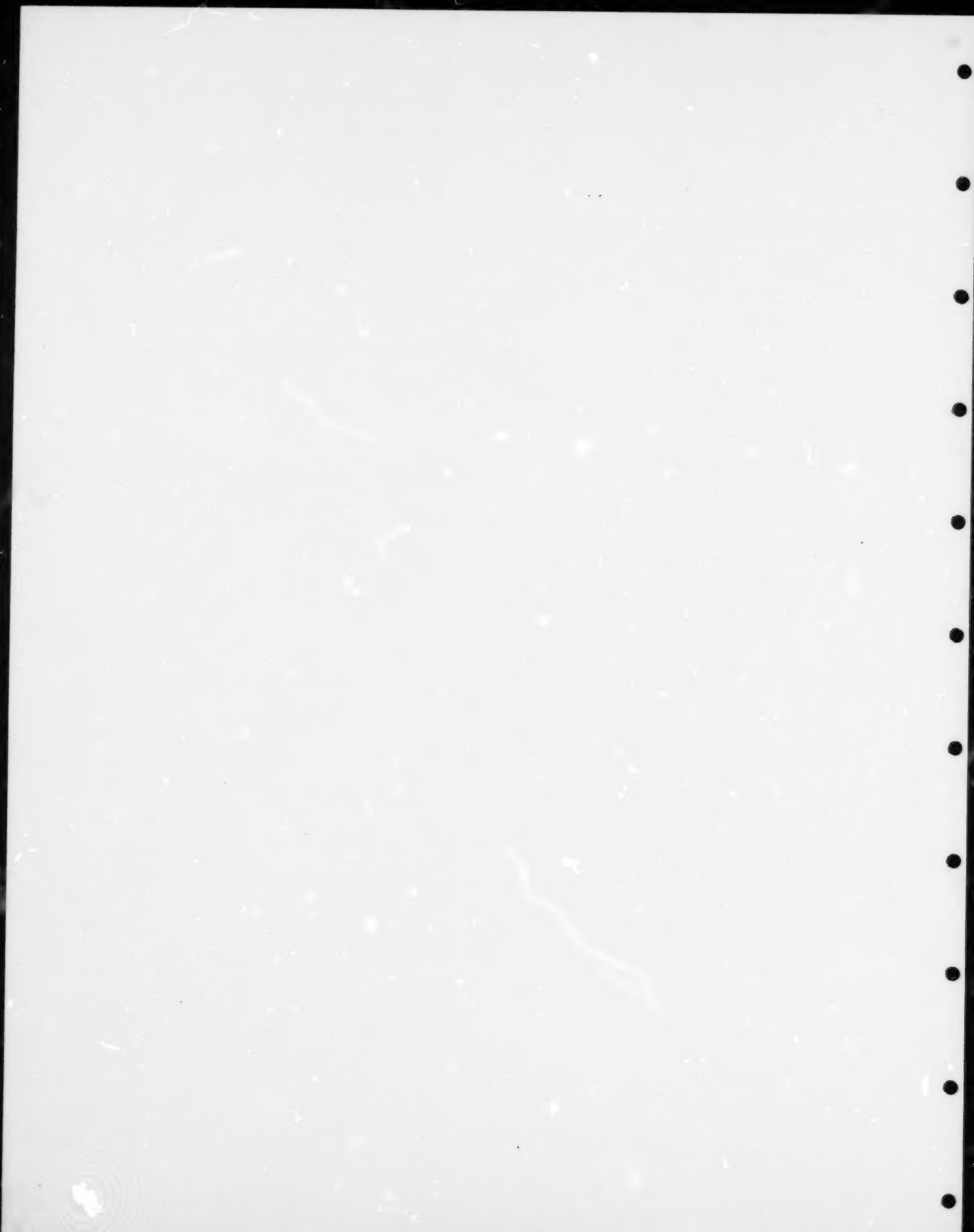
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Introduction

There used to be a sign over a side door on the old granite-faced town hall in an Ontario community. It read, "Public Works and Welfare Department."

Municipal involvement in social affairs is not new, although because there currently is no provision for a municipal role in statutory social services in BC, we tend to forget we do have a history in this field. We also tend to overlook the many ways in which local governments are currently active, or are under pressure to become active in issues affecting the social quality of community life.

The Social Quality of Community Life

By "social quality" is meant those intrinsic elements which shape the well-being of a community and its citizens and make it "liveable" in the full sense of the word. Do people feel safe and secure? Is there a sense of belonging, ownership and pride in the community? Is there economic justice in work and income that ensures a fair return on labour? Do the working conditions of labour create pride and satisfaction?

Is there social justice for those who are disadvantaged to ensure that there are real opportunities and resources to help them regain with dignity their capacity to be full participants in community life? Are we accepting and supportive of those among us who are emotionally, mentally or physically disabled? Is there tolerance, understanding and celebration of cultural, racial, linguistic and religious diversity? And is there a shared belief that striving together for these ideals is essential for the dream of the "good community?"

This paper takes as its starting point a report prepared by the author in 1988 for the GVRD called: Regional Social Issues: Considerations for the Livable Region Strategy.¹ The major findings from this study are summarized below.

Findings of the 1988 Study of Regional Social Issues

The 1988 study was based on interviews with municipal planning officials and with representatives of social agencies. It identified seven social issues of particular social concern in the Region:

¹ Regional Social Issues: Considerations for the Livable Region Strategy, Clague, Michael, in collaboration with Leslie Kemp and Josephine Rekart. Social Planning and Research Council of BC., for GVRD Development Services. July 1988.

- affordable housing
- an aging population
- supports to families
- supports to young people
- poverty
- fostering multicultural tolerance, understanding and equality
- preparing communities for deinstitutionalization

In addition to describing these issues, the study also reported on the quality of life in the Region, particularly with respect to voluntary activity - and found the latter flourishing. Finally, it reported how social planning was an expanding responsibility for local governments.

In this current paper, I have been asked to provide an up-date on the 1988 study and, as well, to expand upon the subject of the organization and provision of social planning and social services in the Region. The paper will begin by suggesting some images of a caring community and then identify symptoms of a troubled community. It will describe the importance to the future of the Region of providing improved services to families, meeting the needs of the elderly and fostering healthy intergroup relations. It will examine concepts and possibilities for the planning and provision of services.

Images of a Caring Community

The following are just a few examples of things that are available in our region which illustrate we are a caring community:

Sidewalk ramps for those in wheelchairs. A public transportation system specifically for those with physical difficulties. Special education resources in the regular school system to support students with severe learning difficulties to participate as fully as possible in regular school life. Street signs in Chinese and English. A child care advocate at City Hall. Municipal services described in the multi-languages of the community. A child care in a secondary school that enables teen mothers to continue their education as well as receive support in caring for their children.

Twenty years ago none of these things existed as a public service (some were being provided in the voluntary sector). There are many other examples. Even the most modest can be viewed as an example of caring about the social quality of life.

It is important that we keep these images in mind, for they tell us that if we choose to, the citizens of a community can act effectively to improve the social quality of life. Often we feel

immobilized by the social ills of the community, and don't recognize what can be accomplished.

Symptoms of a Troubled Community

As the 1988 study found, there are social concerns which require the attention of citizens and of elected officials. In a time of comparative economic prosperity these may seem remote to many. However they are very real for those affected. Unless acknowledged and acted upon with conviction they will become all too real to anyone who cares to look around our community. They will affect the social quality of our community life, and we will be less successful as a caring community.

Affordable Housing

The problem of affordable housing is, if anything, now more acute than we reported two years ago. A recent SPARC study, using Ministry of Social Services and Housing data, found that approximately 40% of the Ministry's clients were paying more than their shelter allowance for accommodation.² "Affordability" is a growing concern, and not just for people who are poor, or for people with low incomes. It is a question for people with middle incomes who are starting families and for people who assumed their retirement income would cover their housing costs. Initiatives such as the VLC properties (designed to add lower cost rental housing to the market) are in process, and social housing figures have been agreed upon for the Expo lands. However these are not yet on market, and in themselves cannot meet the present and anticipated needs for affordable housing in the Region.

No new provincial initiatives are in the offing and recent federal government reductions in social housing support will add to the problem.

A growing economy, high rates of inter-provincial migration and investment, and overseas migration and investment, and a tightening supply of land; all increase the price of land which in turn results in higher priced housing.

There have been shortages of affordable housing before in the Lower Mainland. However it is unlikely that we have ever faced a problem of the magnitude that is now before us.

² Regaining Dignity 1989: An Examination of Costs and Adequacy of Income Assistance Rates (GAIN) in British Columbia, Goldberg, Michael, Social Planning and Research Council of BC, April 1989, Page 17.

Poverty

Poverty in our Region centres on single-parent mothers and their children (7 out of 10 children of single parents in BC live below the poverty line). In 1986 lone-parent families made up 13% of the Vancouver Census Metropolitan Area. Poverty includes young people with few marketable skills and older workers whose skills are redundant. It includes elderly people living alone on social security. In Vancouver, it includes many Native people, more than 40,000 of whom now live in the City.

The evidence of poverty in our community is expressed through the two to three thousand children being fed in the school lunch program of 12 inner city schools. It is reflected in the fact that the Vancouver Food Bank distributed 7,800 bags of groceries in January. It is reflected in the fact that shelters for the homeless are operating at capacity.

However, unemployment continues to decline in the Region. For BC, it dropped from 8.7% in December to 8.5% in January, a time normally when there is an increase. The rate for Vancouver was 6.5%.³ In the Lower Mainland 50,000 more people were employed in 1989 compared to 1988.⁴ The number of social assistance cases and the number of people in receipt of social assistance have been declining as well in the Region. In September 1989 the Ministry of Social Services and Housing had 57,578 cases compared with 65,178 in the previous September. Similarly, the number of people in receipt of social assistance was 98,525 against 110,784 the previous year.⁵ The most significant drop was in the number of single people on social assistance.

Why, given this favourable economic climate, is there continued evidence of poverty? Is it simply a matter of lag that a strong economy will eventually remedy?

Unfortunately not. Poverty is not just limited to who is unemployed or in receipt of social assistance. It is also a part of the employment wage structure. For the population as a whole, income in constant dollars was about the same in 1987 as it was

³ Economic Review, British Columbia/Yukon Territory Region, Issue No: 194. February 1990. P. 10.

⁴ Ibid., P. 2.

⁵ Quarterly Statistical Report, Ministry of Social Services and Housing, September 1989, Table 5, Page 4.

in 1978.⁶ However, for people who work at the low end of the income scale there has been a net reduction in income over this period. For example, the provincial minimum wage, at \$4.50 (with an announced increase to \$5.00 recently delayed) would in constant dollars be about \$7.50 today if it had kept pace with the cost of living and inflation since 1978.

Neither our provincial or Lower Mainland economies can provide employment at income levels that appreciably reduce the number of working poor people. Our economy is sufficiently vulnerable and volatile that the pool of working and unemployed poor will increase when the next economic downturn arrives. Mix in the high cost of accommodation, insufficient child care (see below), and more attention needed to education and training for job improvement, and we have some of the reasons why there are people inadequately housed and fed in our Region.

There is a real fear that the cumulative effect of these shortcomings in our economy and support programs will further entrench poverty and increase the gap between those with adequate incomes and those without. Although there is as yet no firm data for BC, recent work by the Economic Council of Canada has found evidence of a shrinking middle-income group in the country as a whole, what it calls, "an observed trend towards more polarized earnings."⁷ Clearly, attention must be given to strengthening and reforming Canada's income security and social services programs.

Deinstitutionalization

Since 1974 governments in British Columbia have been committed to substantially reducing the number of people living in institutions who have emotional, mental or physical disabilities. In recent years these efforts have accelerated. The emphasis is to return people who have been institutionalized to the community, and to maintain in the community people who would in previous years been admitted to institutions.

There is a widely held view among patients, their advocates and guardians of care providers and now of the Provincial Government, that for many people the community is a more appropriate setting than institutional care. This reflects a growing belief that society must be more accepting of diversity with respect to mental and physical abilities. We need to assist people with disabilities to be part of regular community life as much as

⁶ Knauf, Joachim, Canada Employment Regional Economic Services, in conversation with the writer, February 26, 1990.

⁷ Legacies: Twenty-Sixth Annual Review, Economic Council of Canada, 1989. P. 46.

possible.

The two population groups most significantly affected by deinstitutionalization are those with mental and physical limitations, many of whom in the Lower Mainland were housed at the Woodlands institution, and the emotionally ill, who have been at the Riverview Hospital. It should be noted that institutions elsewhere in the province have been similarly affected. Since 1986 approximately 300 people have been relocated from Woodlands to the community, largely in the Lower Mainland. About 395 are left in the institution. Most will be transferred to the community, except for a number of who require a very high level of care (and may continue to live in a separate facility at Woodlands or in a facility elsewhere).⁸

In 1955 there were 5,000 people with mental illness at Essondale (the former name for Riverview). Ten years ago there were 1,800 and five years ago, 1,300. Today there are 1,000. This number will drop further, but institutional care will continue for those people for whom it is most difficult to look after. While there has been no formal study of where former patients have relocated, it is assumed that the majority have moved into the Lower Mainland.⁹ Former patients are served by the Greater Vancouver Mental Health Services, by hospitals, by the Ministry of Social Services and Housing (if they are in receipt of social assistance), and by advocacy and non-profits groups, including the Canadian Mental Health Association.

This massive shift of responsibility in a relatively short period of time has created pressures on local governments, local support services, on some neighbourhoods, and on the formerly institutionalized patient. To date the transition for those with mental disabilities who lived at Woodlands has gone remarkably smoothly. A well-organized support infrastructure was already in place, and considerable financial support from the provincial government has facilitated the transition.

The situation for former Riverview patients is much less promising. Many are experiencing a bleak and desperate situation. For some it is life on the street. For others it is substandard housing. There is a serious lack of support services for these people. Community-based care can, in the main, only attend to medication and maintenance support for those who are most dependent. Hospital emergency departments experience heavy utilization by people with mental illnesses. Discrimination and

⁸ Chetty Gillian, Regional Director, Ministry of Social Services and Housing, in conversation with the writer.

⁹ Higgenbottom, John, Vice President, Professional Services, Riverview, in conversation with the writer.

fear on the part of the general population is not uncommon.

For those who are mentally ill, the shift to life in the community without proper support can be just as traumatic as life in a large institution. Sometimes it can be greater.

As this paper is being written the Provincial Government has just announced major new funding and organizational initiatives for mental health care, action that is urgently needed. The details were not available at the time of writing but the Canadian Mental Health Association has expressed its satisfaction that these measures will meet the concerns they have been raising. If this proves to be the case then here too will be evidence that we have the capacity to be a caring community.

In planning community services for people with mental illnesses or mental disabilities, it is important to remember that there are short and long term requirements. The short term is to successfully settle in the community those who have been in institutions. The long term requirement is to ensure the adequacy of community resources to serve those coming along in the future who previously would have been placed in institutions.

Providing for the Future

The well-being of families and young people, a sense of security for an aging population, and harmonious inter-group and inter-race relations were identified in the 1988 Regional Social Issues report as important prerequisites for social well-being in the region. Aspects of each that require attention are touched on briefly here.

Families and Young People

Despite tremendous pressures, the family unit remains at the heart of our social framework and values. "Families," it was noted in 1988, "are remarkably resilient and resourceful." ¹⁰

Changes in the work place, in occupations and in the organization of work are affecting families. So do the changing roles of men and women in society, and within the family unit. Indeed, the composition of the family unit is becoming more varied.

The 1988 study reported there were insufficient support services to families in the Region. Crisis services predominate, and many of these are over-taxed. Support services of a preventive nature

¹⁰ Regional Social Issues: Considerations for the Livable Region Strategy, Clague, Michael et al., GVRD Development Services, July 1988, P. 12.

are insufficient. This was especially the case in those communities in the region experiencing a rapid growth in their young family population.

The report recommended that the Region set a standard for a core package of support services that would be available to families in every municipality. They would be supported by municipal funds as well as funds from the senior governments and voluntary sector. In addition, it argued for a region-wide, co-ordinated approach to education, training and employment opportunities for out-of-school youth.¹¹ By supporting the family as a unit, and by designing programs specifically for young people on the margins of education and employment, much can be done for family well-being and the development of the Region's youth.

If there is one area of family support that has become even more important since 1988 it is that of child care. The ability of a single parent or a couple to participate in the work force is directly related to the availability and affordability of good child care. This also holds true for the parent who needs child care in order to pursue further education and training.

We do not have such child care evenly distributed throughout the Region. Indeed, it is doubtful whether it exists sufficiently in any member municipality. There is a shortage of spaces and there is a problem of affordability. Studies in Vancouver reveal that the total spaces available for group daycare, pre-school, and family daycare are weighted in favour of the west side of the city.¹² A January 1990 study of fees in Vancouver found that of 58 group day care operations, only five were charging at or below the Ministry of Social Services of Housing maximum subsidy level of \$300 per month for 3-5-year-old group care.¹³ No Provincial initiatives are expected in child care. The federal government has announced it will be put a ceiling on the Canada Assistance Plan, which provides cost-sharing with the province for daycare for families with low incomes. The burden for the foreseeable future therefore will be on the voluntary sector, the private sector and local government.

The lack of sufficient child care near where parents live (in the neighbourhood) means that many children are in a twice-daily transit shuffle throughout the Region. For parents, it means adding to both their time and expense. While there are

¹¹ Ibid., P. 15.

¹² Vancouver City Day Care Statistics, Chudnovsky, Rita. January 1990, Appendix C - Page 6.

¹³ Fees in Group Day Care Centres in Vancouver, City of Vancouver, January 1990.

indications of a growing willingness on the part of employers to provide daycare, this is limited naturally to the employee's tenure.

Needed is a study of all municipalities in the GVRD of the distribution, availability and affordability of child care. Needed also are more funds to expand the supply.

An Aging Population

Demographic forecasting suggests, and current trends confirm, that there will be an increase in the proportion of elderly and a reduction in the proportion of children in the Region in the coming decades. This trend, of course, varies by municipality. but it still holds for the Region overall, accentuated by the migration of retirees to the Region from elsewhere in Canada.

Canada's population as a whole has been aging, and there has been considerable speculation as to what this means in terms of the capacity of the economy and a shrinking work force to support the growing number of older people. Recent demographic studies by Health and Welfare Canada temper this somewhat. They suggest the trend is somewhat more gradual than previously assumed. If current trends hold, the population will continue to grow, albeit slowly, until 2026, after which it will decline to the level of the 1986 census in 2086 (25 million). Further, it is reported that other countries such as Sweden and West Germany are already further along the reverse aging pyramid with no evident difficulties in managing this demographic configuration. ¹⁴

Regardless, a high proportion of elderly in the population does make its mark on all aspects of economic and social life. British Columbia and the Lower Mainland always have and probably will continue to draw a disproportionate number of older people. Already, there is a marked growth in the private sector response to an older population. There has been a marked increase in the provision of housing and care services by the private sector. Throughout the Region publicly supported continuing care facilities are in heavy demand.

Experience and experimentation over the past fifteen years have provided some reliable guidelines with respect to the organization and provision of services for older people:

- services should support independent living for seniors for as long as possible in the communities in which they have always resided.

¹⁴ "Population Will Grow Until 2026, Study Says," Globe and Mail, Graham Fraser, December 13, 1989.

- facilities and resources for services need to be located conveniently to transportation routes and to where seniors live.

- seniors' services need to be co-ordinated and integrated for user convenience and to ensure that services are tailored as much as possible to individual needs; (the Victoria Health Project is proving to be a successful example of this approach).

While much attention is now going towards the service requirements of an aging population, little consideration appears to be given to what the income and financial resources of seniors are likely to be in the future. Currently we have a retired population that is the beneficiary of strong private and public pension programs. Poverty among elderly couples has dropped significantly in the past twenty years (although less so for the single elderly).

However patterns of employment are changing. Employment in large, financially prosperous industries with strong unions is declining. Job growth is in small and medium-sized enterprises with less security. Moreover, job and career changes are becoming the norm. Long term careers with a single organization are diminishing in the public and private sectors. Public and private pension schemes have not developed sufficient flexibility to reflect the new work patterns.. Pension portability is still at an early stage.

The Registered Retirement Savings Program (RRSP) is increasing as an instrument for retirement planning. However, this works only for those who have the discretionary income to invest in an RRSP. The Federal Government has not, to date, considered the idea of an RRSP refundable tax credit for seniors with low incomes, similar to the refundable child and sales tax credits.

There is a real prospect of growing disparity between financially independent seniors and seniors with low incomes unless pension and tax arrangements are updated. This scenario has implications for the services and tax infrastructures of the those communities in the Region where there are or will be substantial numbers of older people. One part of the older population will be able to financially afford the necessary taxes for services, and as well, be able to pay for private sector services (though they might not support the necessary level of taxation). The other sector of the elderly, those with limited pensions, may find taxation a strain yet will have to rely on public services that could be underfinanced.

Ethnicity and Race

Canada and British Columbia have had substantially more immigrant

arrivals at other points in this century than we are currently experiencing. In 1988, total immigration to Canada was 160,768 while in 1974, 1967 and 1957 it was over 200,000.¹⁵ What is now different are the source regions, ethnicity and race of current immigrants. In the 1950s, 80% of Canada's immigrants came from Europe. Now 70% come from Asia, Africa and Latin America. Of this percentage, 43% are from Asia.¹⁶ The majority of Vancouver's immigrants in recent years have been from Asia.¹⁷

According to 1986 statistics, about 4.5% of Canada's population is composed of visible minorities. If immigration grows moderately over the next ten years this figure might rise to 9.5%.¹⁸ People will not, of course, distribute themselves evenly, and larger concentrations of visible minorities can be expected in some areas than in others.

Canada has always been a multicultural society. In recent years we have been adding more cultures and races to the composition of our population. As a consequence there is apprehension about cross-cultural and inter-racial tension and conflict.

Needed are opportunities for communication, education and the fostering of mutual respect and understanding. Citizenship education is required of both established Canadians and new arrivals. Established Canadians need to be familiar with the backgrounds and cultures of the newcomers in order to appreciate what they bring to the country and to learn how to welcome and involve them in community life. For their part, the new Canadians require opportunities and encouragement in order to become familiar with Canadian life and values-including those of multiculturalism-in order to participate fully.

Vancouver, Richmond, and Burnaby are the three municipalities in the Region with the largest number of residents whose mother tongue is other than that of the two official languages. These municipalities are giving leadership in fostering good intercultural and race relations through their public services

¹⁵ Canadian Immigration: A Statistical Overview, Varnai, George, Regional Director, Immigration, Canada Employment and Immigration. February 23, 1989. Table G2.

¹⁶ Immigration to Canada: Issues for Discussion, Immigration Canada, November, 1989. P. 8.

¹⁷ British Columbia Immigration Highlights: January to June 1989, Central Statistics Bureau, Province of British Columbia, September 1989. Table 1: Immigrant Landings by Selected Origins and Destinations.

¹⁸ The Vancouver Sun, Tepper, E., June 4, 1988. pp. 1-2.

and through support for public education activities.

Now is the time to establish the climate for healthy inter-group and race relations in the Region. The GVRD and its member municipalities can articulate principles and support programs and services toward this end as an integral part of local and regional planning for the future.

The Greater Vancouver Region: At A Crossroads?

Optimists see our Region on the edge of cosmopolitan greatness. Skeptics see the possibility of what pollster Allan Gregg calls the "Manhattanization" of Canada's major cities; habitations for the very wealthy and the very poor.¹⁹

This brief survey of social issues in the Region suggests that we are approaching a crossroads. Issues of affordable housing, poverty and low incomes, and the quality of family life are awaiting a response equal to the magnitude of the challenge they pose. A weakened social safety net in need of reform and declining commitments of funds for income security programs and health care erode the social infrastructure.

We are fortunate in that we still have a choice about the future direction of the region. While municipal governments and the Regional District cannot on their own resolve the larger social policy issues, it is evident that they have a very real part to play, at the front line, in shaping the social quality of life in their jurisdictions.

The Organization and Provision of Social Services

The Citizen and Social Responsibility

Caring and social responsibility are very much debated these days. As public funds are constrained or cut back for social services, questions inevitably arise about the respective responsibilities and roles of government (the public sector), the private sector (business and labour), the voluntary sector, and finally, of families and individuals.

Canada has a history of strong, non-sectarian, collective responsibility for meeting social need. It is reflected in the funding and services provided by government. It is also reflected in the highly organized voluntary sector. Yet today there is much questioning about the funding of services, about the methods of provision, and about the services themselves. This raises social

¹⁹ "Public Values in the 1990s," presentation by Allan Gregg to the GVRD Regional Challenges Seminar on "Changing Public Values," Vancouver, February 23, 1989.

policy issues that are beyond the scope of this paper, but which are central to the kind of society we will shape for the future:

Is caring primarily an individual, personal choice and responsibility or is there indeed a collective social responsibility for the common welfare?

To the degree we accept a collective social responsibility, how is this best expressed?

The meaning of words like "citizen" and "civil society" are very much bound up in these matters. They reflect the contract of benefits and obligations that free people agree to in their systems of governance and participation. They carry the norms and values of those intrinsic elements cited at the outset of this paper which forge the well-being of a community.

Municipal Government and Social Services

Until the 1980s there were welfare departments in many municipal governments in the Lower Mainland. In 1913 the City of Vancouver built and operated a municipal child care facility for preschoolers. In 1915 it opened a Women's Employment Bureau. In 1918, women's organizations in British Columbia and the mayors of Vancouver, New Westminster and Chilliwack went to Victoria to argue the case for a mother's pension for non-military widows and wives who had been deserted or separated from their husbands. A Mothers' Pension Act was passed in 1920.

In the past decade we have fallen out of thinking about an active role for local governments in social services. Income security has been taken over by the senior governments. Related counselling and employment assistance programs are operated by the senior governments and the private and voluntary sectors.

However in practice, concern for the social welfare of their citizens in the broadest sense has never left city hall. Sometimes by choice, sometimes by default, municipal governments find themselves involved in matters affecting the social quality of community life. Today this involvement is accelerating. There are three particular reasons. One is the complexity of urban life, as reflected in the social issues described in this report. A second reason is financial restraint by senior governments in their expenditures for social programs. The consequences inevitably surface in the community, and from the community, to city hall. Thirdly, the BC government has been engaged in decentralizing, deinstitutionalizing and privatizing a range of social services. It views this reorganization as a more appropriate way to meet the needs of the groups concerned.

The just-announced federal budget changes can only increase local financial and service difficulties and the burden on those

citizens most in need of the programs that have been affected. Last year's limitations on expenditures for Established Programs Financing (EPF) affect health care and post-secondary education. The current budget's ceiling on the Canada Assistance Plan (CAP) in BC means that income support programs and child care will be even more constrained. Cut-backs to special needs groups such as women's transition centres and native organizations affect some of the most vulnerable members of our community.

It is evident that the decentralization and privatization of public services, deinstitutionalization, and reductions in public funding by the senior governments are causing a substantial shift in responsibility for social services to the community. Local governments are feeling the impact, but the scale and the implications of the shift are to date receiving no concerted attention.

The examples cited in this paper are symptoms of this shift. So, too, is the referendum vehicle that school districts will have to use to raise additional funds. Virtually every service ministry of the Provincial Government is engaged in some form of decentralization. Yet municipal governments do not have the financial base to adequately assume these responsibilities. Nor do they necessarily have structures and decision-making apparatus equal to the task.

There is considerable merit in having many social services organized by and accountable to the communities in which they operate, as will be discussed shortly. However the off-loading of these services and their financing to an unprepared community is a recipe for failure. Further fragmentation and unequal availability and quality of services will be very real possibilities. Furthermore, adequate services need to be provided in tandem with maintaining and improving our various universal support programs, such as medicare and income security, programs which only senior governments have the capacity to operate. The Great Depression dramatically illustrated that meeting these kind of obligations is simply beyond the capacity of local government.

Seven municipalities in the GVRD now have social planners. There is some form of health and social services or social planning committee in a majority of the municipalities. Almost all provide either grants or tax breaks for non-profit groups. Coinciding with this trend in municipal-based social planning is a re-organization of the structure of the United Way in the Lower Mainland. "Community Committees" now replace the former Divisions. These Committees have the responsibility to co-ordinate fundraising and social planning for the United Way throughout the Lower Mainland. Connections are naturally being formed with municipal social planners.

These developments are heartening. They suggest that a region-

wide approach to social concerns that links public, municipal and voluntary sectors may now be possible. Missing, however, is a key player, the provincial government and its related ministries who both fund and still provide a range of services.

It cannot be assumed that current trends will simply evolve into a coherent and co-ordinated approach for identifying and responding to social needs in the Region. Such an approach requires agreements about who has the authority to allocate resources and set priorities. It requires sufficient consensus about the respective roles and responsibilities of government, the private and voluntary sectors, and of individuals.

The Partners in the Social Services

Part of the current debate about the provision of social services is what role the consumer and the voluntary sectors play in relation to public services. Calls for less government involvement come from the belief that cost savings will result, out of a belief that people should do more for themselves, and out the conviction that the private (for-profit) and voluntary, non-profit sectors can do it better. It should be pointed out that these are not necessarily compatible nor consistent reasons for reduced government involvement.

The growth of the self-help movement is one of the distinguishing features of the social services in the 1980s. The resilience of voluntary agencies in meeting unmet needs and in taking on services that government once provided or wishes to see provided outside the public sector attests to the resourcefulness and adaptability of the voluntary sector.

It is, however, a mistake to assume that either the self-help or voluntary sectors can assume either the scale of social responsibilities that need to be exercised today, nor, more fundamentally, the collective obligation that citizens have to one another through the intermediary of the State. Rather we need to be clear about responsibilities and roles that are appropriate to all of the sectors, including government.

The Community Resources Boards Experience

The most extensive attempt at reform and reorganization in the social services in British Columbia occurred between 1973 and 1975. Though instituted by the New Democratic Government of the day, it represented the culmination of thinking in British Columbia and Canada at the time that crossed all political lines. Social services, it was widely acknowledged, needed to be decentralized to communities and neighbourhoods, co-ordinated and integrated, and locally accountable. In this manner, it was reasoned, the bewildering array of services in the public and private sectors could be provided more effectively and

efficiently, and tailored to community and client needs.

The BC experiment included the establishment of the Vancouver Resources Board (VRB) with responsibility for all statutory and a range of non-statutory social services. Its members were elected by residents. Paralleling the VRB at the neighbourhood level, and legally part of it, were community resources boards, again with locally elected representatives. Elsewhere in the Region and the province there were community resource societies (resources boards in the making) and fledgling boards that were just developing when the experiment was ended.

The VRB model attempted to put social services on the local civic agenda, just like education, and to a degree, health. Provincial authority and funds were delegated to the VRB, which was then accountable for the services provided and monies expended. The VRB was a planning and coordination vehicle. It was a funder of community-based services. It provided services itself. It was a forum for public discussion and debate about the social needs and welfare of the community. The elected board acted as an adjudicator among competing interests, and as an ombudsman vehicle for complaints by people who believed they had been unfairly treated or not heard. It was also an advocate for change in the social welfare system as a whole.

This community resources boards experiment throughout BC ended with a change of government in Victoria. It had been politically controversial throughout its existence. Apart from its political vulnerability there were a number of factors that can be said to have contributed to its demise:

- existing civic structures were not adequately involved in the process of creating this new mechanism.
- the established systems of voluntary agencies were insufficiently involved.
- insufficient attention was given to bringing the provincial bureaucracy in the then Ministry of Human Resources on-side to support the new system.
- a widely held perception that a large and complex administrative structure was being built alongside existing systems, adding another layer of bureaucracy and government to the communities involved.

Yet despite these problems, research into the attitudes and experiences of those involved at the time, the consumers, staff and the elected citizens of all political persuasions found they were remarkably positive about the actual operation of the boards. People became more familiar with social need in their

community. ²⁰ They had a direct role in setting priorities and in working to achieve them. The adversarial climate normally found between bureaucracies and citizens was reduced markedly as volunteers, consumers and professional social service staff worked together to solve problems. The positive results were more apparent and widely appreciated.

The core concepts of the community resources boards still continue to surface today; decentralizing services, co-ordinating and organizing them to suit community needs, and creating mechanisms for local accountability. Some are pioneers from other social service experiments in the '70s that have stood the test of time. The Community Human Resources and Health Centre Societies in James Bay, Victoria, and in the Queen Charlotte Islands are such examples. So is the Britannia Community Services Centre in Vancouver. More recent initiatives that have similarities are the Victoria Health Project (planning, co-ordination and funding of services for the elderly) and the decentralization of services for those with mental and physical disabilities to the member branches of the BC Association for Community Living.

It is significant that all these examples offer substantial opportunities for volunteer participation in the provision of services. It is also important to observe that such involvement is possible because the systems are designed to encourage and support volunteer activities to be a complement, and not a replacement, for those services which require paid staff and professional functions.

A Framework for Social Service Planning and Provision

The Greater Vancouver Regional District can lay much of the groundwork for an approach to social service provision that reflects the principles of decentralization, co-ordination and integration, and local accountability and participation. However, the chances of success are dependent on forming from the outset a confident partnership involving the key players: the relevant provincial ministries, local government, the voluntary agency sector, and consumers.

The lessons from experiences in BC and elsewhere in Canada suggest that the optimal framework for the provision of social services has the following delineation of roles and responsibilities:

²⁰ Reforming Human Services: The Experience of the Community Resources Boards in B.C., Clague, Michael, Dill, Robert, Wharf, Brian and Seebaran, Roop. University of British Columbia Press, Vancouver, 1984.

The Provincial Government

Responsible for setting overall social priorities and management and financial standards for those services which it funds and/or has statutory authority.

Allocates funding to a local authority for those activities that reflect local priorities.

Provides specialized expertise to assist local authorities.

Local Planning and Service Provision Authority

Composed of a formal partnership of local government, voluntary sector and consumer interests whose particular structure and responsibilities reflect local requirements.

Plans, co-ordinates and monitors public and voluntary services within boundaries that are all coterminous.

Supervises the provision of provincially-mandated social services.

Administers a budget that can be a mixture of provincial and municipal funds for the development of services peculiar to local requirements.

Promotes the co-ordination of public and voluntary dollars in service provision.

Promotes voluntary participation and self-help in meeting community social needs and priorities.

Fosters public accountability within the community for the adequacy and appropriateness of social services.

The subject is, of course, more complex than that suggested here. For example, the education, training, and job placement services of the federal government ought to be part of this system. These nonetheless do constitute the central elements in any attempt to give substance and meaning to community planning and provision of social services.

Community Social Planning: A Tool for Creating the Liveable Region?

The sign over that old Ontario city hall, "Public Works and Welfare Department," epitomized the strengths and the weaknesses of local responsibility for social welfare provision in the past. The strengths were that politicians knew their community well

and, if they chose, could direct their resources to services that genuinely helped those in need to regain or to maintain their independence and dignity. Vancouver's early child care and women's employment service are examples. But the weaknesses were of a kind that could demean and stigmatize those in need: local politicians could arbitrarily decide who would be assisted and who would not. The provision of "welfare" could be conditional upon a willingness to work off this debt through joining a city road gang.

We have come some distance from these former times. And we don't wish to return to them in their original form. Today, the concept of organizing local planning and service provision mechanisms within a provincial framework that sets standards and provides a core budget merits serious consideration. It would prove to be a powerful tool for influencing change towards those values that do enhance the social quality of life.

In 1986, the Federation of Canadian Municipalities approved a policy to "encourage municipal governments to adopt social policy analysis and planning in their policy-making process."²¹ We are making encouraging progress in this Region with individual municipalities developing their own social planning structures. The next step is to build formal links across municipalities and between local governments and the voluntary sector.

²¹ Federation of Canadian Municipalities Policy Statement, 1986. P. 8.